Telephone (914)

333-9637

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Customer Number: 24737 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Name Registration Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: X 24737 The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Fax Assignee Name and Address: KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record are and title is supplied below is authorized to act on behalf of the assignce Signature Date 14 January 2005

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Michael E. Marion

Authorized Representative

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

10/564388

IAP15 Rec'd PCT/PTO 12 JAN 2006

PTO/SB/96 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.
Application No./Patent No.: Concurrently Filed/Issue Date: Concurrently
Entitled: A PORTABLE ELECTRONIC DEVICE AND A HEALTH MANAGEMENT SYSTEM ARRANGED FOR MONITORING A PHYSIOLOGICAL
Koninklijke Philips Electronics N.V. , a <u>corporation</u> (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. ☑ the assignee of the entire right, title, and interest; or
□ an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is ———— % in the patent application/patent identified above by virtue of either:
A. [/] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
OR
B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:
1. From: —
The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
2. From: To:
The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
3. From: To:
The document was recorded in the United States Patent and Trademark Office at Reel, or for which a copy thereof is attached.
[] Additional documents in the chain of title are listed on a supplemental sheet.
[] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]
The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.
(914) 333-9627
Telephone number Signature
Corporate Counsel Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL030850 US

As a below named inventor, I h	ereby declare that:		
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
		name is listed below) or an original, fir claimed and for which a patent is soug	
the specification of which (chec	ck only one item below):		
is attached hereto.			
was filed as United States a	pplication		
Serial No			
on			
and was amended	-		
<u> </u>			
was filed as PCT internation	nal application		
Number PCT/TB2004/0	51159 filed on 08	July 2004	
on			
and was amended under PCT	Article 19		
on		+w	(if applicable).
I hereby state that I have review claims, as amended by any am		nts of the above-identified specificatio	n, including the
I acknowledge the duty to discle Title 37, Code of Federal Regu		rial to the examination of this applicati	on in accordance with
or inventor's certificate or of an States of America listed below any PCT international application	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign app n(s) designating at least one country of foreign application(s) for patent or inv country other than the United States of the application(s) of which priority is of	other than the United ventor's certificate or of America filed by me
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:			
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03077233.9	16 July 2003	YES

U.S. DEPARTMENT OF COMMERCE -Patent and Trademarks Office (July 1994)

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL030850 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245

Direct Telephone Calls to: (name and telephone number) (914)332-0222

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	FULL NAME OF INVENTOR	FAMILY NAME SUCH	FIRST GIVEN NAME Olaf	SECOND GIVEN NAME
201	RESIDENCE & CITIZENSHIP	CITY Aachen	STATE OF FOREIGN COUNT Germany	RY COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Auf Der Hoern 110A	CITY D-52074 Aachen	STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME LAUTER	FIRST GIVEN NAME Josef	SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	CITY Geilenkirchen	STATE OR FOREIGN COUNT Germany	RY COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Neckarstrasse 16	CITY D-52511 Geilenkirchen	STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME REITER	FIRST GIVEN NAME Harald	SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP	CITY Aachen	STATE OR FOREIGN COUNT Germany	RY COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Lufterweid 5A	CITY D-52076 Aachen	STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME SCHMIDT	FIRST GIVEN NAME Raif	SECOND GIVEN NAME
204	RESIDENCE & CITIZENSHIP	CITY Aachen	STATE OR FOREIGN COUNT Germany	Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Jakobstrasse 10	CITY D-52064 Aachen	STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME MONTVAY	FIRST GIVEN NAME Andras	SECOND GIVEN NAME
205	RESIDENCE & CITIZENSHIP	CITY Stuttgart	STATE OR FOREIGN COUNT Germany	RY COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS August-Laemmle_Weg 11	CITY D-70374 Stuttgart	STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME MUEHLSTEFF	FIRST GIVEN NAME Jens	SECOND GIVEN NAME
206	RESIDENCE & CITIZENSHIP	CITY Aachen	STATE OR FOREIGN COUNT Germany	Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Kamper Strasse 49	CITY D-52064 Aachen	STATE & ZIP CODE/COUNTRY Germany
	I	I .	ı	I

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such liful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR-201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
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DATE 08.08.2004	DATE 08.08.2004	DATE 08.08.2004
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U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL030850 US

As a below named inventor, I h	nereby declare that:		
My residence, post office addre	ess and citizenship are as stat	ted next to my name.	
I believe I am the original, first plural names are listed below) entitled:	and sole inventor (if only one of the subject matter which is	name is listed below) or an original, claimed and for which a patent is so	first and joint inventor (if ught on the invention
the specification of which (che	ck only one item below):		
is attached hereto.			
was filed as United States a	application		
Serial No			
on			
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Number PCT/IB2004/0	51159 filed on 08	July 2004	
on Pt.1/182004/0	<u> </u>		
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and was amended under PCT	Article 19	W	//flibl->
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I hereby state that I have revieuclaims, as amended by any am		ents of the above-identified specifical	tion, including the
I acknowledge the duty to discl Title 37, Code of Federal Regu		rial to the examination of this applica	ation in accordance with
or inventor's certificate or of an States of America listed below any PCT international applicati	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign and the state of the country of the state of the country of the state of th	other than the United nventor's certificate or s of America filed by me
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COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03077233.9	16 July 2003	YES

U.S. DEPARTMENT OF COMMERCE -Patent and Trademarks Office

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Jack E. Halken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Michael E. Marion, Reg. No. 32,265 Michael E. Marion, Reg. No. 30,245 FULL NAME OF INVENTOR SUCH Olaf Olaf FULL NAME OF INVENTOR SUCH Olaf CITIZENSHIP Achen Germany POST OFFICE ADDRESS Auf Der Hoem 110A D-52074 Aachen Germany FULL NAME OF INVENTOR FULL NAME OF INVENTOR FULL NAME OF POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY Germany FULL NAME OF POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY Germany FULL NAME OF FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF FAMILY NAME FIRST GIVEN NAME FIRST GIVEN NAME FULL NAME OF FAMILY NAME FIRST GIVEN NAME FULL NAME OF FAMILY NAME FIRST GIVEN NAME FIRST	Comb (includ	oined Declaration des Reference to PC	For Patent Application and Power International Applications)	er of Attorney (Continued)		Attorneys Docket Number PHNL030850 US
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INVENTOR SUCH Olaf STATE OF FOREIGN COUNTRY GOUNTRY OF CITIZENSHIP Aachen Germany Gormany STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY Gormany	Jack Mich Edwa	E. Haken, Reg. ael E. Marion, R ard M. Blocker, I	No. 26,902 leg. No. 32,266 Reg. No. 30,245		name and teleph	one number)
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INVENTOR REITER		ADDRESS	Neckarstrasse 16	D-52511 Geilenkirchen		
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ADDRESS Jakobstrasse 10 D-52064 Aachen Germany FULL NAME OF INVENTOR MONTVAY Andras 205 RESIDENCE & CITY Stuttgart Germany POST OFFICE ADDRESS August-Laemmle Weg 11 FIRST GIVEN NAME FULL NAME OF INVENTOR MUEHLSTEFF 206 RESIDENCE & CITY STATE OR FOREIGN COUNTRY Germany FOST OFFICE ADDRESS August-Laemmle Weg 11 D-70374 Stuttgart Germany FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME Jens STATE & ZIP CODE/COUNTRY Germany FIRST GIVEN NAME SECOND GIVEN NAME Jens SECOND GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME Germany SECOND GIVEN NAME	204	CITIZENSHIP	Aachen	Germany		many
INVENTOR MONTVAY Andras		ADDRESS	Jakobstrasse 10	D-52064 Aachen		many
CITIZENSHIP Stuttgart Germany Germany POST OFFICE ADDRESS August-Laemmle_Weg 11 D-70374 Stuttgart Germany FULL NAME OF INVENTOR MUEHLSTEFF 206 RESIDENCE & CITY STATE & ZIP CODE/COUNTRY Germany SECOND GIVEN NAME Jens SECOND GIVEN NAME SECOND GIVEN NAME Jens STATE & ZIP CODE/COUNTRY Germany STATE & ZIP CODE/COUNTRY Germany COUNTRY OF CITIZENSHIP Germany POST OFFICE ADDRESS Kamper Strasse 49 CITY STATE & ZIP CODE/COUNTRY Germany STATE & ZIP CODE/COUNTRY Germany		INVENTOR	MONTVAY	Andras		
ADDRESS August-Laemmle Weg 11 D-70374 Stuttgart FULL NAME OF INVENTOR MUEHLSTEFF RESIDENCE & CITY STATE OR FOREIGN COUNTRY Germany POST OFFICE ADDRESS August-Laemmle Weg 11 D-70374 Stuttgart FIRST GIVEN NAME Jens SECOND GIVEN NAME COUNTRY OF CITIZENSHIP Germany Germany STATE & ZIP CODE/COUNTRY Germany CITY D-52064 Aachen Germany	205			_		
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and		b d. ala 4b -4 -11				

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such lillful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
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